

STDs in the South

Public Health Impact

The southern region of the United States consists of the District of Columbia and 16 states: Alabama, Arkansas, Delaware, Florida, Georgia, Kentucky, Louisiana, Maryland, Mississippi, North Carolina, Oklahoma, South Carolina, Tennessee, Texas, Virginia, and West Virginia. This region has consistently had higher reported rates of chlamydia, gonorrhea and primary and secondary (P&S) syphilis than the other regions of the country (Northeast, Midwest, and West). The reasons for these higher rates in the South are not well understood, but may include differences in the racial and ethnic distribution of the population, poverty, and availability and quality of health care services. Regional differences in STD rates are particularly disturbing in light of the fact that STDs can increase the risk of HIV transmission. The high HIV prevalence among childbearing women living in the South is consistent with the high rates of these other STDs in the region.¹

Observations

- The South has consistently had higher rates of gonorrhea and P&S syphilis compared with other regions throughout the 1980s and 1990s (Figures 11 and 24, Tables 14 and 27). From 1997 through 2001, the South also had a higher reported rate of chlamydia than the other regions of the country (Figure 4, Table 4).
- In 2001, six of the 10 states with the highest chlamydia rates were in the South (Figure 3, Table 3). Similarly, seven of the 10 states with the highest rates of gonorrhea were located in the South (Figure 10, Table 13). All 16 of the southern states had 2001 reported rates of P&S syphilis that were greater than the Healthy People Year 2010 (HP2010) objective of 0.2 case per 100,000 population (Figure 22, Table 25).
- In 2001, 403 (66%) of 606 counties with P&S syphilis rates above the HP2010 objective were located in the South (Figures 23 and KK).
- County-specific rates of chlamydia and gonorrhea in 2001 were calculated for those southern states submitting county level data (Figures LL and MM). These county level data were reported through the National Electronic Telecommunications System for Surveillance (NETSS), *and are provisional for all states shown except Alabama, Arkansas, Delaware, Florida, Indiana, Kentucky, Mississippi, North Carolina, Oklahoma, South Carolina, Tennessee, Texas, and Virginia where hardcopy reports have been discontinued based on consistent, high quality, and timely submissions of NETSS data (see Figures A1, A2, and A3 in **Appendix**).*

¹ Koumans EH, Sternberg M, Gwinn M, Swint E, Zaidi A, St. Louis M. Geographic variation of HIV infection in childbearing women with syphilis in the United States. *AIDS* 2000;14:279-87.

Figure KK. South — Primary and secondary syphilis case rates by county, 2001

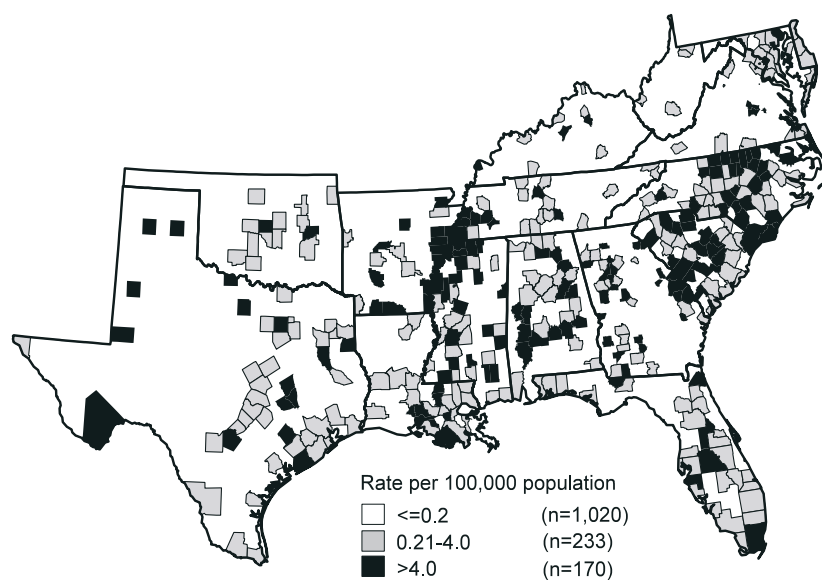
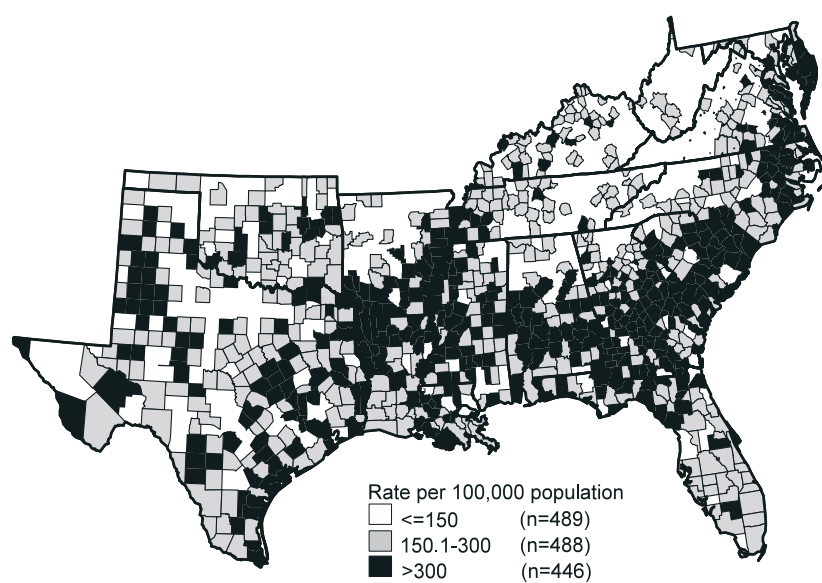
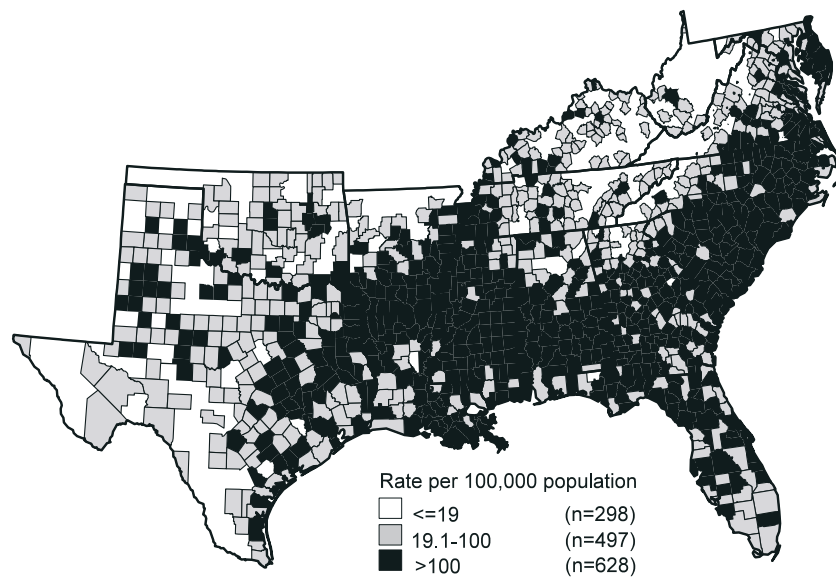


Figure LL. South — Chlamydia case rates by county, 2001



SOURCE: National Electronic Telecommunications System for Surveillance (NETSS) data

Figure MM. South — Gonorrhea case rates by county, 2001



SOURCE: National Electronic Telecommunications System for Surveillance (NETSS) data

